1040A Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

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Ü	se RS ibel.	You	our first name and initial (if joint return, also give spouse's name and initial) Last name							Y	Your social security number		
0 W	ther- ise,	Pre	resent home address (Number and street, including apartment number, or rural route)							Spouse's social security no.			
p	lease ' rint	City	y, town or post	t office, State and ZIP code				Your occu	pation	>			
01	type.							Spouse's	occupation	>			
	sidenti ction C			o you want \$1 to go f joint return, does yo				<u>Yes</u> Yes			Note: Checking not increase you duce your refun	r tax or re-	
For	Priva	cy /	Act and Pa	perwork Reduction A	ct Notice, see p	age 23 of Inst	tructions						
Ci	ling S neck On ne Box.	ıly	tus 2 3 4	Married filing se	ehold (with qua	er spouse's soci	al security no. ab n). (See page 8 d	ove and ful of Instruction	ons.) If he	or she	is your unmarried		
Always check the b Spouse 65 or over Blind box labeled Your- self. Check other c First names of your dependent children who lived with you						Enter number boxes checked on 5a and b Enter number of children	of						
				Other dependents:	(2) Relationship	(3) Number of months lived	(4) Did dependent	(5) Did	you provide e-half of de	more	listed on 5c Enter number	> []	
			(1)	Name	(L) Kelationship	in your home.	\$1,000 or more?	en	t's support?		of other		
								_			dependents Add numbers		
Here			6	Total number of exer	notions claime	<u> </u>					entered in boxes above		
2 H	7	Wa								7	1		
Forms W-2	, 8a	Int	erest inco	ries, tips, etc. (Attac ome (Complete p or you have a	age 2 if over any All-Savers inte	\$400 erest)	8a						
rms				(Complete p			8b		_				
Fo				ines 8a and 8b)					_			ļ	
3 of				See page 11 of Inst									
py E				e 8d from line 8c (but ent compensation (in		•				8e			
ပိ				ount, if any, from wo						9b			
Please Attach Copy B				oss income (add line	-								
Att		str	uctions on	"Earned Income Cre	edit"					10			
ase	11			000 by the total nun						11			
Ple				ome (subtract line 1.				• • • • •	. ;	12			
	13a			contributions to car			1 1						
	(See page 13 of Instructions)												
	b			l income tax withnel e page 13 of Instru	•		13b						
9	c			me credit (from page									
He				nes 13a, b, and c) .						14			
int	15a			mount on line 12. (S									
m		then find your tax in the Tax Table on pages 17–22) 15a 15b 15b											
Pay				ned income credit (income 15b)	-					//////////////////////////////////////			
ᆽ	10	10	tai (auu iii	nes 15a and 15b)			· · · · · · · ·						
Attach Payment Here	17	If I	ine 14 is larger than line 16, enter amount to be REFUNDED TO YOU					▶	17				
٧	18			arger than line 14, e									
ᆜ		pay		ternal Revenue Service."						18 les and	statements, and	to the best	
Please Sign Here			of my kno	owledge and belief, it is eparer has any knowledg	true, correct, and	d complete. Dec	claration of preparent	arer (other	than taxp	ayer) is	based on all info	rmation of	
							\						
			Your s	signature		Date					sign even if only one		
Paid			Preparer's signature				Date	self	eck if -em-	۲ Pr	eparer's social se	ecurity no.	
	eparer	•	Firm's na	me (or			1	I bio	yed ► [E.I. No.				
Us	e Only	'	yours, if self-employed) and address						ZIP cod	e >			

If you received more than \$400 in ordinary dividends and non-

CAUTION: You may NOT file Form 1040A (you must file Form 1040 instead) if any of the following apply to you:

- You could be claimed as a dependent on your parents' return AND had interest, dividends, or other unearned income of \$1,000 or more.
- You had a foreign financial account or were a grantor of, or transferor to, a foreign trust.
- You received interest or dividends as a nominee (in your name) for someone else.
- You received or paid accrued interest on securities transferred between interest payment dates.
- You received any capital gain distributions.

If you received more than \$400 in interest or you received any

Note: You may also be required to file Form 1040 for other reasons. See pages 4 and 5 of Instructions.

Part | Dividend Income

interest from All-Savers Certificates, you Part I and list the names of the payers and interest on the lines below. See page 10 of what interest to report.	the amounts of	the	amounts of the dividends on the lines below. Be sure to include any nontaxable distributions on these lines. They will be deducted on line 5 below. See page 10 of the Instructions for a definition of ordinary dividends and nontaxable distributions.					
Name of payer	Amount		Name of payer	Amount				
Interest income (other than qualifying interest from All-Savers Certificates).			3					
1b Total. Add above amounts								
1d Total			4 Total. Add above amounts					